

263

PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS
ORIGINAL CERTIFICATE OF BIRTH

1. County of Gila
District of _____
Town of Globe
or _____
City of _____

State Index No. 183
County Registrar No. 326
Local Registrar No. _____

No. _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)
St. _____ Ward _____
If child is not yet named, make supplemental report, as directed.

2. Full name of child Joseph Forrest Willis
3. Sex of Child male
4. Legitimate? yes
5. Date of birth 4-25-1924
6. Twin, triplet or other _____
7. No., in order of birth _____

FATHER
8. Full name Commodore Dewey Willis
9. Residence (Usual place of abode) Globe, Ariz.
10. Color or race white
11. Age at last birthday 25 (Years)
12. Birthplace (city or place) Poplar Bluff Missouri
13. Occupation miner
14. Nature of industry _____

MOTHER
15. Full maiden name Elsie Mae Hawkins
16. Residence (Usual place of abode) Globe, Ariz.
17. Color or race white
18. Age at last birthday 17 (Years)
19. Birthplace (city or place) Oklahoma
20. Occupation _____
21. Nature of industry Housewife

22. Number of children of this mother { (a) Born alive and now living 1
(b) Born alive but now dead 0
(c) Stillborn _____
(Taken as of time of birth of child herein certified and including this child.)
23. Were precautions taken against syphilis neonatorum? yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE
I hereby certify that I attended the birth of this child, who was born alive 2:05 P.M. on the date above stated.
(Born alive or stillborn.)

Signature T. Harper, M.D.
Address Globe, Arizona
Filed 4-26-1924
Filed 5-6-1924
Local Registrar B. J. Fox
County Registrar _____

*When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidences of life after birth.
Given name added from supplemental report _____
Month, day, year. _____

162-425-582

WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD
N. B.—In case of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of each, in order of birth stated.